

09/1767485

PTO/SB/06 (08-00)
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PATENT APPLICATION FEE DETERMINATION RECORD					Application or Docket Number 09 76 7485	
CLAIMS AS FILED - PART I					SMALL ENTITY OR OTHER THAN SMALL ENTITY	
(Column 1) (Column 2) (Column 3)						
FOR	NUMBER FILED	NUMBER EXTRA			RATE	FEE
BASIC FEE (37 CFR 1.16(a))						\$ 355
TOTAL CLAIMS (37 CFR 1.16(c))					x \$ 9 =	234
INDEPENDENT CLAIMS (37 CFR 1.16(b))					x 40 =	160
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+ ____ =	
					TOTAL	749
<p>* If the difference in column 1 is less than zero, enter "0" in column 2</p> <p>7.1904</p>						
CLAIMS AS AMENDED - PART II					SMALL ENTITY OR OTHER THAN SMALL ENTITY	
(Column 1) (Column 2) (Column 3)						
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(e))	*	Minus	=		x \$ ____ =	OR x \$ ____ =
Independent (37 CFR 1.16(b))	*	Minus	=		x ____ =	OR x ____ =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ ____ =	OR + ____ =
					TOTAL	OR TOTAL
(Column 1) (Column 2) (Column 3)					ADDIT. FEE	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(e))	*	Minus	=		x \$ ____ =	OR x \$ ____ =
Independent (37 CFR 1.16(b))	*	Minus	=		x ____ =	OR x ____ =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ ____ =	OR + ____ =
					TOTAL	OR TOTAL
(Column 1) (Column 2) (Column 3)					ADDIT. FEE	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(e))	*	Minus	=		x \$ ____ =	OR x \$ ____ =
Independent (37 CFR 1.16(b))	*	Minus	=		x ____ =	OR x ____ =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ ____ =	OR + ____ =
					TOTAL	OR TOTAL
(Column 1) (Column 2) (Column 3)					ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.
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